

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007
PHONE (602) 364-1PET (1738) FAX (602) 364-1039
VETBOARD.AZ.GOV

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: Oct. 30, 2018 Case Number: 19-35

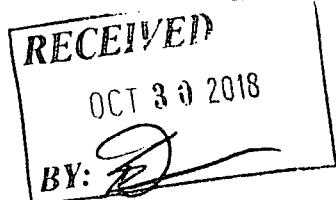
A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: LEAH ASH *
Premise Name: NORTHWEST PET CLINIC
Premise Address: 252 W. INA RD
City: TUCSON State: AZ Zip Code: 85704
Telephone: 520-742-4148

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

Name: REBECCA BLANDENSHIP
Address: _____
City: _____ State: _____ Zip Code: _____
Home Telephone: _____ Cell Telephone: _____

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.



C. PATIENT INFORMATION (1):

Name: COCO

Breed/Species: COCKER SPANIEL

Age: 3 Sex: FEMALE Color: BROWN

PATIENT INFORMATION (2):

Name: _____

Breed/Species: _____

Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.

LEAH ASH
NORTHWEST PET CLINIC
252 W. 1NA Rd
TUCSON AZ 85704
520-742-4148

E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

BARBARA PATTERSON

[REDACTED]
[REDACTED]
[REDACTED]

Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Rebecca Blankenship

Date: 10/25/18

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

PLEASE SEE ATTACHED LETTER

BY:

OCT 04 2018

RECEIVED

Becky Blankenship
9515 N. Calle Buena Vista
Tucson, AZ 85704
October 1, 2018

To Whom it May Concern at the State Veterinary Board,

On or about August 2nd at 2:00 p.m., I brought my three year old Cocker Spaniel dog, Coco, into Northwest Pet Clinic located in Tucson, Arizona at Ina and Oracle for an emergency. She was trembling and bleeding vaginally. The vet and I discussed what her potential issue could be and I mentioned the possibility of pregnancy, as I have many dogs on my property. She was examined by one of their vets then was palpated and X-rayed. The X-ray showed no puppies. The vet returned to me and suggested spaying Coco because something was "seriously wrong." I agreed to spay Coco based on their professional recommendation and she was spayed around 8:00 p.m. that evening. Per their instructions, I was to leave Coco at the clinic and return at 10:00 p.m.

I left my house at 9:45 p.m. to go pick up Coco. As I was walking to my car, I heard an animal crying. I followed the noise and I found a puppy. I brought the puppy to their clinic, where they examined the puppy and asked me to go buy puppy formula in case Coco, who was just spayed, was unable to nurse her puppy. It occurred to me that if there is one puppy, there may be other puppies. I went back to the house to check and I found two more puppies in the back corner of my kennel that were wet and cold. There had been a tremendous storm that evening. I brought those puppies to the clinic as well.

I brought Coco and the puppies home with me that night, where Coco had an uneventful recovery but one of the puppies died. Once I had adjusted to these new and unexpected puppies and helped my dog recover from surgery, I contacted Northwest Pet Clinic asking for full refund for the spaying of my dog. I left a letter with the receptionist and mailed an additional letter.

My chief complaint is that due to their negligence to explore a less invasive option Coco did not need to be spayed. I was always hoping to

have multiple litters from her and I would have never agreed to spay her had I not thought this was an emergency situation, as their vet had led me to believe. Because the vet did not consider or present any alternative possibilities as the cause of her condition to me, Coco endured quite a bit of trauma between an unnecessary surgery and being separated from her newborn puppies for many hours, where they had been left unattended in extreme heat followed by a monsoon storm. I believe due to the rigorous educational process to become a veterinarian, combined with a veterinarian's obligation to attend continued learning classes and stay current on veterinarian practices, the vet should have had an idea that Coco had delivered puppies. Nowhere in my discussion with the vet did they suggest to me that she might have delivered puppies even though placental material had been found in her uterus.

I think there were enough obvious symptoms that a properly trained veterinarian would have considered puppies might have been born recently and explored the option before performing an unnecessary surgery. Weeks ago, I contacted the office asking for a full refund due to the unnecessary spaying of my dog and now her inability to have any future puppies. Northwest Pet Clinic has never responded to me, in any manner, to my letter.

I am writing to you today to ask you to investigate this clinic as well as the veterinarians practicing there to ensure that they are utilizing veterinarian practices that are consistent among the field. I am concerned they are performing other unnecessary procedures on other animals rather than taking the time to properly diagnose an animal or present the owner with a less invasive alternative in which to treat their animal. I would like you to recommend to the clinic they should reimburse me for my clinic visit and all expenses incurred within that visit.

If you have any questions, please contact me at [REDACTED].

Thank you.

Sincerely,

Rebecca Blankenship
Rebecca Blankenship

Becky Blankenship

October 1, 2018

To Whom It May Concern at the State Veterinary Board:

I finally received a reply from the Northwest Pet Clinic and I picked up my dog's medical records. Although there is no record of the name of the vet who treated my dog, a call to the office gave me the name of Dr. Leah Ash.

There were a number of inaccuracies, faulty conclusions, and an opinion that it would be best that I not have an intact female because I am an irresponsible pet owner, in the letter I received.

My dog had been outside in a kennel with cooling and a yard where the dogs can go for exercise and relieve themselves during part of that morning. There were a lot of people, all my children and my grandchildren, going in and out of my house that morning. I had my 4 dogs in the kennel so that the house would be calmer and the dogs would be in a quieter environment.

Coco, my dog, showed no signs of being in labor that morning. At about 1:30, my assistant went out to the kennel to bring the dog into the house. She stepped into the kennel and called the dog. The dog came through the dog door to her and she brought the dog to me. That is when I noticed the dog was in distress.

I would never have told the veterinary office that my dog was in labor for 30 minutes for 2 reasons. First of all, I didn't know what was happening with her but I thought she needed to see the vet. Second of all, if I thought she was in labor, I think 30 minutes could be normal for starting to produce a first puppy in a maiden bitch.

In the letter that I received from the vet's office, Dr. O'Donnell mentions a radiologist's specialist's report. That was never mentioned when I was there and I never heard about any abnormality being present. I looked through her records and never saw anything about that mentioned or any

specialist being mentioned. In fact the letter never shows the name of the vet who took care of my dog. I had to call the office to get that info.

The records of the operation did say that there was a "large amount of think hemorrhagic discharge with a firmly attached placenta". As a layman, that would seem to indicate that whatever took place in her uterus had been immediate. I would think a vet would consider that birth had just happened.

The last paragraph of the letter from Dr. O'Donnell, I found particularly offensive. Because I had not had the dog X-rayed before birth, and had left her alone for a few hours, I was deemed a substandard dog owner. She inferred the spaying my dog was doing her a favor so that she would never have to go through a pregnancy and birth with such an irresponsible owner. I don't believe I was irresponsible and that is not a vet's choice to make. I came to them, for expert help. They should have seen that there was a good possibility that the dog had just had puppies.

Sincerely,

Becky Blankenship
Becky Blankenship



Dear Mrs. Blankenship,

We have received two copies of your letter regarding our care of your dog, Coco. After reading your letter, I made a thorough and careful review of Coco's medical record so that I may respond appropriately to your concerns and request for a refund.

I came to the conclusion that a refund is not warranted in this situation, and that my veterinary staff acted in the best interest of their patient, Coco. *LETTER implies that as I am a terrible owner, being spayed is in the best INTEREST OF The dg*
We depend entirely on an accurate and truthful medical and situational history from our patients' families in order to make accurate diagnoses and appropriate recommendations. Our patients cannot tell us how they feel or what has been happening to them.

NOT TRUE, NEVER said she was in labor
When we received the phone call from you stating that Coco had been in labor for about 30 minutes, and that there was blood coming from her vulva, we were very concerned, which is why we recommended you bring her to us right away. What you described is not normal for a dog having puppies. We thought that since you stated how long Coco had been in labor, it meant that you had been watching her closely.

I have never seen ~~see~~ a report

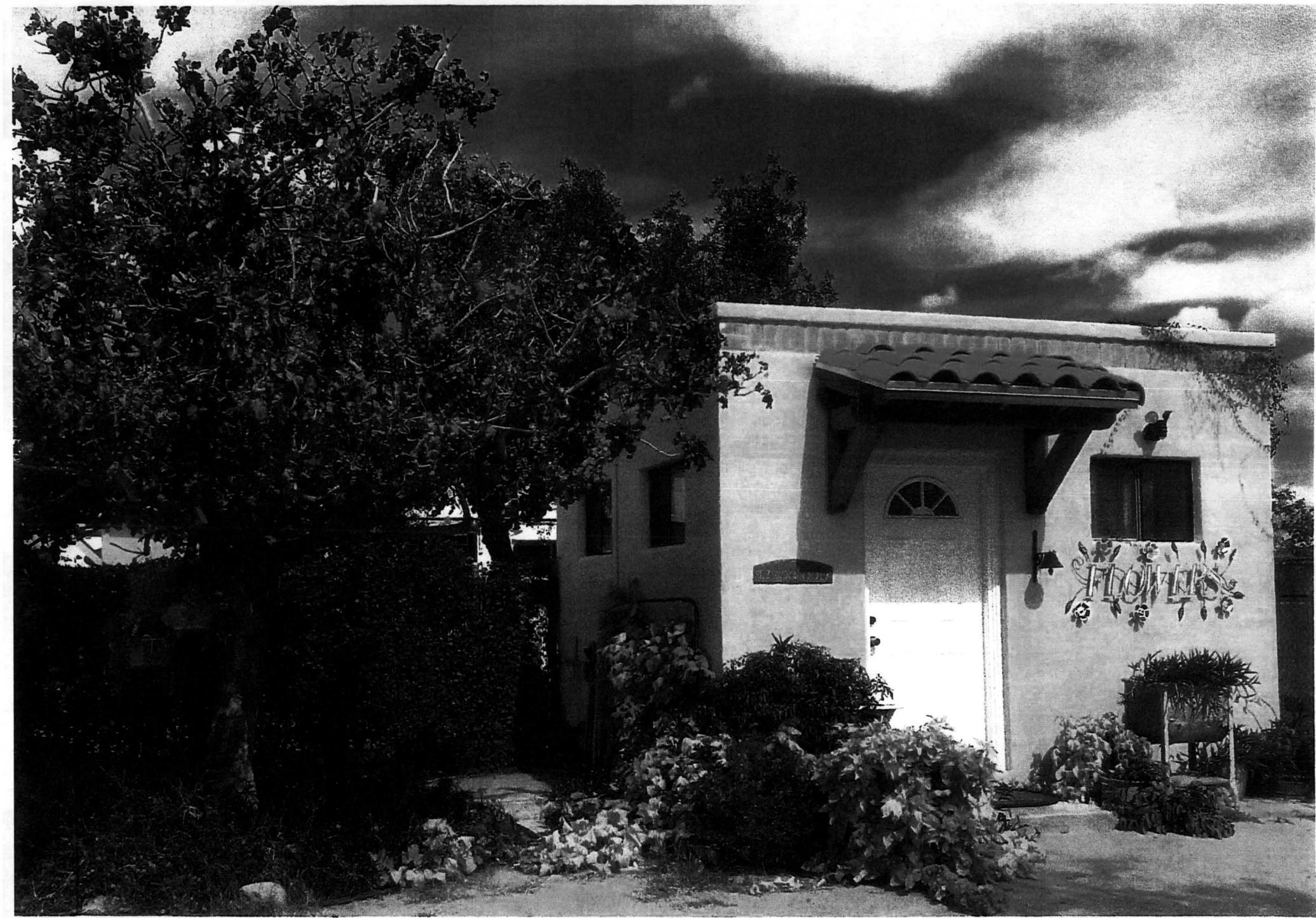
Our examination of Coco revealed a significant vaginal discharge, but the x-ray did not show any puppies. The radiology specialist's report confirmed our concerns about an abnormality in Coco's uterus, that could have been an infection or other serious medical problem. Neither the radiology specialist nor my veterinary staff suspected that Coco had already had her puppies, since most pet families watch their pets very closely when they are getting close to time for labor.

From the events described in your letter, it appears that you were not watching Coco closely. She did not receive proper prenatal care and x-rays during her pregnancy and was left outside in a kennel during the extreme heat of the summer. We do not recommend leaving pets outside in the extreme heat of summer even when they are not in the final stages of pregnancy and due to deliver any day. Labor and delivery in a dog can take a few hours. You clearly left her for extended periods of time, in the extreme outside heat, without a proper nesting box. Otherwise, you would likely have noticed that she had had her puppies.

Not True, she was in a block build building with coolings she went into the bed back yard to park her puppies
As Coco's life and the lives of her puppies seem to be at risk due to the lack of proper pre- and post-natal care, I believe that spaying Coco was in her best interest to prevent any further problems with pregnancy and delivery.

Sincerely,

Dr. Erin O'Donnell
Owner/Medical Director
Northwest Pet Clinic



Kennel Building



Inside kennel

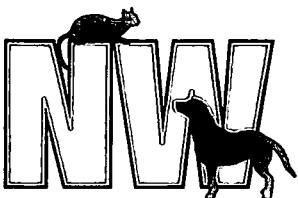




HEATING & Cooling

BIRTH
Spot





NORTHWEST PET CLINIC, PLLC

252 West Ina Road Tucson, AZ 85704

520.742.4148 fax 520.742.7404

www.nwpetclinic.com

19-35

November 13, 2018

The Arizona State Veterinary Medical Examining Board

1740 W. Adams St, Suite 4600

Phoenix, AZ 85007

Dear Members of the Board:

"Coco" Blankenship is an approximately 3 year old, at the time intact female Cocker Spaniel that I evaluated on August 1st, 2018 who presented with bloody and green vaginal discharge and being in labor and distress for approximately 30 minutes prior to presentation. Rebecca Blankenship was the only owner present at the time of exam and the only owner I interacted with or spoke with during Coco's treatment at Northwest Pet Clinic (NWPC).

The owner reported a history of Coco being in distress, trembling and in labor for 30 minutes prior to presentation. Labor was described as acting uncomfortable, trembling but not having obvious active contractions. The history that the owner provided, as it pertains to Coco being in labor for 30 minutes prior to presentation, can be corroborated by CSR Nikole Rinde who scheduled the work-in appointment, technician Ashley Olson who took the initial patient history, and myself.

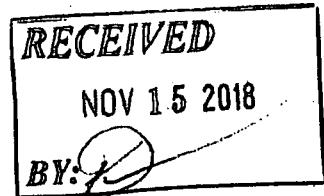
Additional history details provided by the owner include that Coco was bred with her male Maltese. The owner was unable to provide me with an exact date of this breeding, just that she was in late term pregnancy. Per the owner, the pregnancy was never definitively confirmed nor a puppy count obtained prior to presentation at Northwest Pet Clinic.

On physical exam, Coco was quiet and sluggish but alert. Her exam was largely unremarkable except for a moderate amount of green and dark brown vaginal discharge. On vaginal exam, the cervix was open but no fetii were palpated in the birth canal. The abdominal exam was unremarkable and no fetii were palpated. The patient was lactating at the time of exam.

Abdominal radiographs were completed. Radiographs are automatically submitted to a radiologist for review per our hospital protocol. I felt confident in my interpretation of the radiographs revealing an enlarged, but empty uterus with no evidence of fetii present. Because of this, I did not recommend a stat radiology consult or wait for the radiology report to return before proceeding with treatment. The radiology report was consistent with my initial interpretation.

I included the thorax in the radiology study given the patient's history of pulmonary coccidioidomycosis and a pulmonary nodule. I did not make any recommendations based on treatment of the patient's reported Valley Fever but radiographs were forwarded to patient's primary care DVM.

In house lab work that included a complete blood count and chemistry 10 panel was performed. Results revealed a leukocytosis characterized by a neutrophilia, anemia, thrombocytosis and hyperglobulinemia.



I was significantly concerned by the brown and green vaginal discharge present on physical exam. That, in conjunction with the history and diagnostic findings made my initial primary differential a developing pyometra, possibly secondary to a resorbed fetus. Pseudopregnancy was a differential I considered given Coco's lactation status and an empty uterus. However, the amount and characteristic of the vaginal discharge was not consistent with a pseudopregnancy.

I recommended to the owner that we admit Coco for stabilization and for an ovariohysterectomy that evening. We discussed medical management and observation, however my recommendation was for an ovariohysterectomy even though the cervix was open because of my concern that a developing pyometra was being caused by a resorbed fetus.

I had no reason to believe or consider that puppies had already been born based on the history that the owner provided. While the diagnostics performed could have been supportive of a postpartum female, they were also supportive of a developing pyometra.

As a clinician, the history and timeline are often the determining factors that guide our primary differential and ultimately what treatment we recommend. The timeline I was given was 30 minutes of being in distress and in labor prior to presentation. That is not enough time for a dog to go through stage one and stage two labor resulting in puppies and thus I did not consider it as a possibility.

The owner consented to this treatment plan. The owner did not inform me at any time that she was intending to use Coco for further breeding purposes and was hoping to avoid a spay.

The ovariohysterectomy was routine as per the operative report. I evaluated the reproductive tract post-operatively and as per my description in the record, found 'thick hemorrhagic discharge with firmly attached placenta in one of the uterine horns'. At the time, I felt that these findings reaffirmed my initial primary differential which was a developing pyometra resulting from fetal resorption with a retained placenta.

I spoke with the owner on the phone post-operatively to relay Coco's stable status in recovery and findings following uterine evaluation, to which owner was appreciative.

At approximately 10:30 PM the owner arrived for pick-up and met me with an exclamation of "look what I found" to which she revealed a single puppy that was snuggled against her chest. The owner relayed to me that she heard a cry when she was walking to her car to pick up Coco. The owner followed the cry and found a puppy in her drive way. I immediately triaged the puppy to treatment. The puppy was hypothermic (temperature too low to register) but normoglycemic. I asked my manager, Amber Houston, to advise the owner to purchase KMR for the puppy. My priority was to initiate a warming protocol and nursing quickly, but was concerned about weakness and the possible inability of the puppy to latch on and appropriately suckle. The owner later returned with two additional puppies that she said she found behind Coco's kennel.

All three puppies were hypothermic but normoglycemic on presentation. Puppies were warmed to normothermia and it was ensured that they could successfully latch and suckle prior to discharge.

Practicing good medicine in any case is highly dependent on obtaining a complete and accurate history. For this history, we are reliant on the owner, as our patients cannot speak for themselves. While the owner provided me with a history that she thought was accurate, it was in fact both inaccurate and incomplete. In order for Coco to have gone through first and second stage labor resulting in three puppies, Coco would have had to have been unobserved for more than a few hours. It would not have been possible for Coco to have whelped three puppies within the 30 minutes of labor the owner reported.

Because of this, in conjunction with patient presentation, diagnostic findings and the fact that a pregnancy confirmation and puppy count was not determined prior to presentation, post-whelping vaginal discharge with missing puppies was not on my differential list as a possible cause.

Based on Coco's history provided, her presentation and diagnostics, I recommended and made a medical decision that I felt was in the best interest of my patient at the time.

Clearly, my diagnosis of Coco was incorrect. However, my argument is that I was unable to arrive at a correct diagnosis because of the owner's inattention and subsequent lack of information regarding her dog's pregnancy status. The owner was unable to provide me with an accurate and complete medical history because she had not pursued appropriate prenatal care for Coco and because she missed that Coco had whelped three puppies.

I have not been in direct contact with the owner following Coco's discharge from NWPC. A technician callback was completed on August 2nd, which per communication notes the client reported that Coco and her three puppies were doing very well. I received records from the Veterinary Specialty Center of Tucson showing that Coco was seen on August 4th for a 24-hour history of anorexia and not defecating. Based on those records, the owner elected to monitor.

I was only made aware of the current status of my patients after receiving the complaint from the board. I do not know the timeline or the events that led to the death of one of the puppies.

All client complaints were directed to and responded to by management at Northwest Pet Clinic. I was not made aware of the letter of complaint, nor was I involved in the response.

If you have any questions, please do not hesitate to contact me. Thank you for your time.

Sincerely,



Lesley Ash, DVM

DOUGLAS A. DUCEY
- GOVERNOR -



VICTORIA WHITMORE
- EXECUTIVE DIRECTOR -

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1-PET (1738) • FAX (602) 364-1039

VETBOARD.AZ.GOV

INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: PM Investigative Committee: Donald Noah, D.V.M. - **Absent**
Amrit Rai, D.V.M.
Adam Almaraz – **Acting Chair**
Christine Butkiewicz, D.V.M.
William Hamilton

STAFF PRESENT: Tracy A. Riendeau, Investigations
Michael Raine, Assistant Attorney General
Victoria Whitmore, Executive Director

RE: Case: 19-35

Complainant(s): Rebecca Blankenship

Respondent(s): Lesley Ash, D.V.M. (License: 6700)

SUMMARY:

Complaint Received at Board Office: 10/30/18

Committee Discussion: 2/5/19

Board IIR: 3/20/19

APPLICABLE STATUTES AND RULES:

Laws as Amended April 2018
(Green); Rules as Revised September
2013 (Yellow).

On August 1, 2018, "Coco," a 3-year-old intact female Cocker Spaniel was presented to Respondent on emergency due to trembling and vaginal bleeding. After exam and diagnostics, Respondent suspected developing pyometra, possibly secondary to a resorbed fetus. She recommended stabilization and a spay procedure that evening; Complainant approved.

Later that evening while leaving her home to pick up the dog, Complainant found three new born puppies. Complainant believes the dog was misdiagnosed and the surgery was unnecessary.

Complainant was noticed and was available telephonically.

Respondent was noticed and appeared.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Rebecca Blankenship
- Respondent(s) narrative/medical record: Lesley Ash, DVM
- Consulting Veterinarian(s) narrative/medical record: Erin O'Donnell, DVM
- Witness(es) narrative: Barbara Blankenship (Complainant's daughter); Northwest Pet Clinic Staff.

PROPOSED 'FINDINGS of FACT':

1. On August 1, 2018, Complainant stated that at approximately 2:00pm, she presented the dog to Respondent because she was trembling and bleeding vaginally. Complainant was concerned that the dog was pregnant as there were many dogs on the property. According to Respondent and hospital staff members, Ms. Rinde and Ms. Olson, Complainant reported the dog had been in labor for approximately 30 minutes. Complainant vehemently denies this and states she did not know what was going on with the dog.
2. According to the medical record, Complainant reported that the dog had been in labor for approximately 30 minutes and was having green and bloody discharge from her vaginal area. The dog had bred with her male Maltese and this was her first litter. The dog had no pre-natal care. The dog was also on fluconazole and doxycycline for Valley Fever and a mass in her chest. Upon exam, the dog had a weight = 24.8 pounds, a temperature = 102 degrees, a heart rate = 120bpm and a respiration rate = 42rpm. Respondent noted that the dog was lactating, had thick dark brown and green vaginal discharge and an open cervix on vaginal exam.
3. Abdominal radiographs were performed and revealed an enlarged, empty uterus with no evidence of fetuses present. In house lab work revealed leukocytosis (neutrophilia), anemia, thrombocytosis and hyperglobulinemia. Respondent's assessment was pseudo-pregnancy vs fetal absorption with possible secondary pyometra. She discussed her findings with Complainant and recommended starting pain medications, IV fluids and performing an ovariohysterectomy that evening. Complainant approved.
4. An IV catheter was placed and the dog was started on Lactated Ringer's Solution at 40mL/hr; morphine and cerenia was administered. The dog was pre-medicated with midazolam, induced with Alfaxan and maintained on isoflurane. After the surgery was performed, Respondent opened up the uterus and uterine horns which held a large amount of thick hemorrhagic discharge with firmly attached placenta in one on the uterine horns. The dog was prescribed Amoxi/Clav and EloxiOral to be administered at home.
5. Later that evening, Complainant was leaving her home to pick up the dog when she heard whining. She followed the noise and found a new born puppy, which she presented to Respondent. The puppy was triaged and warming techniques were initiated. Complainant was instructed to purchase replacement milk in case the dog could not feed the puppy. Complainant's daughter found two more new born pups which Complainant also brought to Respondent for evaluation. All puppies were warmed and successfully suckling. The dog and her puppies were discharged.
6. Complainant sent a letter to Respondent's premise requesting a refund of fees as she felt Respondent misdiagnosed the dog and therefore the spay procedure was unnecessary.
7. Respondent's associate sent Complainant a letter refusing fee reimbursement. Complainant also felt the letter was unprofessional.

COMMITTEE DISCUSSION:

The veterinary Committee members commented that it would not occur to them to ask the pet owner if there were already puppies born, if they were presented with the same situation. There were discrepancies between Complainant's statements and what was written in the medical records.

The Committee had concerns with the care that was provided by Complainant, not Respondent. A known pregnant dog was left unobserved with two male dogs – there could have been more than three puppies born. Additionally the dog was on fluconazole throughout the pregnancy. The Committee felt Respondent's concern for pyometra was reasonable and her care and treatment of the dog was appropriate.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the Veterinary Practice Act occurred.

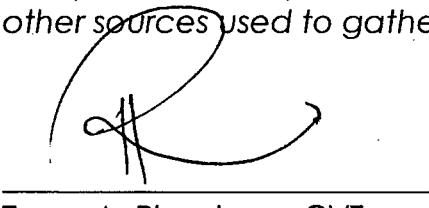
COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.



Tracy A. Riendeau, CVT
Investigative Division